PET	ITION FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional) 015280-368240US		
	FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 200			
Application Number 10/815,340			Filed March 30, 2004	
For MUCOSAL CYTOTOXIC T LYMPHOCYTE RESPONSES				
Art Unit 1645			Examiner Nicole Kinsey	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
	☐ Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ <u>1590</u>
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
	Applicant claims small entity status. See 37 CFR 1.27.			
	A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.			
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number <u>54,443</u>				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
-	Signature)		March 6, 2007 Date	
	Nicholas V. Sherbina, Reg. No. 54,44	206-467-9600		
-	Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
\Box	Total of forms are subr	nitted.		